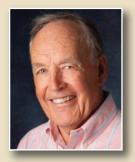
# **CONTINUING EDUCATION IN DENTISTRY /** ÉDUCATION CONTINUE EN DENTISTERIE

# **Mastering Clinical Advancements** Gérer les progrès cliniques

By Dr. John N. Nasedkin, DDS, FRCD(C), FADM



About the Author

Dr. Nasedkin is a consultant prosthodontist in Vancouver Canada, who has taught occlusion/TMJ and esthetics on every continent. He is a past-president of the American Equilibration Society and a member of the Pacific Coast Society of Prosthodontists, CARDP, the American Academy of Cosmetic Dentistry, and other many prestigious organizations. He is the co-editor of the book, Occlusion: The State of the Art. He is the mentor of the first esthetic study club in Canada and a clinical assistant professor at the University of British Columbia. He can be contacted at: jnasedkin@telus.net or www.drnasedkin.com.

# **ABSTRACT**

The learning process leading to changes in the way dentists provide clinical services for their clients can be a slow and arduous journey. Changes suggested by advertisements, journal articles, technician suggestions and lectures attended, require effort for us to implement in our practices. The mentor/clinical application model which is a principal method in British Columbia is encouraged for greater application across Canada.

#### RÉSUMÉ

Le processus d'apprentissage menant aux changements dans la façon dont les dentistes fournissent des services cliniques à leurs clients peut être un parcours lent et ardu. Les changements suggérés par les annonces, les articles de journaux, les techniciens et la participation à des conférences exigent un certain effort de notre part pour mettre ces changements en pratique. Le modèle d'application clinique/mentor, principale méthode en Colombie-Britannique, est encouragé partout au Canada.

entists are inundated with advertisements and promises of new materials and technologies at every turn. Keeping up has become a full-time job with the difficulty of determining which of these so-called promises merit introduction into one's regular practice activity. There is no better place to make these decisions than a study club.

Dentistry has long followed the mentorial model where an expert in a

specific subject shares knowledge with dentists who become his students. Study club activities vary from province to province and country to country, but some noticeable trends are apparent. Evening sessions or study clubs generally follow the format of a mentor lecture followed by discussion and perhaps case presentations. Some literature reviews can occur but these activities are short and sweet and only useful to a degree. Frequently the group will have dinner in association

with the activity and this can, on occasion and unfortunately, become the principal reason for attending.

In Ontario the lecture method predominates as the learning experience. Centers like The Dental Learning Centres in Oakville offer a lecture room with adjacent clinical demonstration suite www.tdlc.ca for more information). In Toronto the Centre for Continuing Dental Education of the University of

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Toronto, is a beautifully equipped lecture room in a central setting (visit www:utoronto.ca/cde for more details). Various other groups with specific interests have established programs which sometimes use the operatories of dentist's offices for clinical learning programs on weekends. Interestingly the predominant clinical programs in Ontario are almost exclusively related to implant surgical treatments.

In BC we have a long tradition of clinical restorative study clubs dating back nearly 100 years. The original groups were the foil study clubs which have morphed into the American Academy of Gold Foil Operators. Several of the gold foil study club mentors became the formative instructional staff when the University of Washington dental school was begun in the post-war period.

For more than 25 years, we had a clinical teaching facility at the College of Dental Surgeons of BC in Vancouver. This was recently revitalized by the Study Club Alliance of BC and re-opened as the Sirona Learning Centre. Here we have a 30-seat lecture room, an adjacent glassed demonstration operatory, and

12 fully equipped dental chairs. The prevailing study club model is a half day per month in which a lecture is followed by clinical experience on the dentist's patient to convert knowledge at a challenge level into clinical experience. We also have a complete clinic for continuing dental education at UBC. There is a complete webcasting camera set-up so the demonstrations and lectures can be transmitted on-line across the province (www.sironalearningcentre.org).

My own study club is known as TEST – The Esthetic Study Team - meeting for 26 years. The accompanying photos were taken at our January session where Corrie Paulsen of 3M Espe conducted a Digital Impressioning clinical workshop on the Lava Chairside Oral Scanner. Our current theme is CAD/CAM restorations and we will next meet with representatives of CEREC and use the AC Bluecam for digitally scanning then designing and completing restorations using the In-Lab milling machine. In September of 2008 we had a clinical demonstration of the iTero scanner. Our objective is for each member or our group to develop personal experience with the use of digital technology.

Dental assistants and staff members are encouraged to participate in the clinical teaching sessions since it is their understanding and commitment to a process which insures its successful application. Study club members are provided with teaching aids to assist in this implementation for use in staff meetings and in the essential training sessions required for all for staff members.

Dentistry's challenges are minimized by firsthand experience. The objective of clinical workshops and study clubs is to directly transfer new information into everyday skillsets.

Even when assisting a colleague, a dentist adds to his/her memory bank of case history and some experience which is useful in one's own office. In Canada the learning experience varies from province to province and within the provinces themselves. We encourage the use of the mentor/clinical model for your esthetic and restorative advancement in continuing dental education.



**2011 Annual Scientific Meeting** 

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### **NASEDKIN**



Dr. Brian Baird scans his preparation watched by members of TEST and Corrie Paulsen in the white coat.



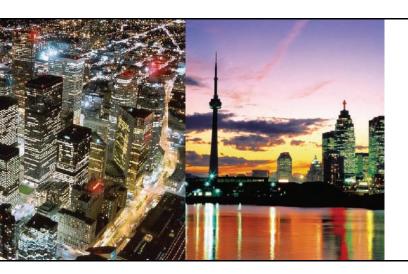
Dr. David Monaghan prepares a crown with the microscope.



Dr. Monaghan scans his tooth preparation.



Dr. Ed Lowe, Dr. Baird, and Corrie Paulsen prepare data for transmission to the LAVA milling facility.





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